

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SA	1120	23-107-01
O.I.P.E. CLASSIFIER	12	8119	9-14-01
FORMALITY REVIEW	ZA		
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Original	1/16/02
1	✓
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15	✓
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Claim	Date
Final	
Original	
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Claim	Date
Original	
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If more than 150 claims or 15 actions  
staple additional sheet here